POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	*lw*	*68904*	*4/4/00*
O.I.P.E. CLASSIFIER			*4-6-00*
FORMALITY REVIEW		*6 M M*	*6.2 rv*
RESPONSE FORMALITY REVIEW		*6 M 77*	*7-11.00*

INDEX OF CLAIMS

✔	.... Rejected	N .... Non-elected
=	.... Allowed	I .... Interference
—	(Through numeral)... Canceled	A .... Appeal
÷	.... Restricted	O .... Objected

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Claim		Date							
Final	Original	10/2/63	4/4/04						
	1	✓							
	2	✓							
	3	✓							
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Claim		Date							
Final	Original	4/4/04							
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If more than 150 claims or 10 actions
staple additional sheet here

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